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## TRANSMITTAL FORM

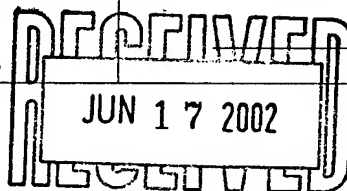
(to be used for all correspondence after initial filing)

Application Number	10/085,889
Filing Date	February 28, 2002
First Named Inventor	Michael J. Rendon
Group Art Unit	2811
Examiner Name	
Total Number of Pages in this Submission	Attorney Docket Number SC11814TP

### ENCLOSURES

(check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Communication to Group
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Licensing-Related papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to Group {Appeal Notice, Brief, Reply Brief}
<input type="checkbox"/> Affidavits/Declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Extension of time Request	<input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address	<input type="checkbox"/> Status Letter with appropriate copies
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Other Enclosure(s) (please identify below)
<input checked="" type="checkbox"/> Information Disclosure Statement & 1 Reference	<input type="checkbox"/> Request for Refund	<input type="checkbox"/> Response to Restriction Requirement
<input type="checkbox"/> Certified Copy of Priority Documents	<input type="checkbox"/> CD, Number of CDs	<input type="checkbox"/> Associate Power of Attorney
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	Remarks	<input type="checkbox"/> RCE
<input type="checkbox"/> Response to Missing Parts Under 37 CFR 1.52 or 1.53		<input type="checkbox"/> Copy of Notice to File Missing Parts
		<input type="checkbox"/> Transmittal of Formal Drawings



### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual	Kim-Marie Vo	Registration No.	50,714
Signature	<i>Kim-Marie Vo</i>		
Date	<i>May 17, 2002</i>		

### CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage thereon, as first-class mail, in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on the date listed below:

Typed or printed name	Elaine Cox
Signature	<i>Elaine Cox</i>
Date	<i>5/14/02</i>